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Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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### UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.		TI-35799				
First I	nventor	John Kevin Rote				
Title	Digital Actuator Control and Method					
Express Mail Label No.		EU 019864502 US				

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEN See MPEP chapter 600 concerning utility pate		ADDRESS TO:  Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450						
1. <b>X</b> Fee Transmittal Form (e.g., PTO/SB/ (Submit an original, and a duplicate for fee		7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  1 a. Computer Readable Form (CRF)						
2 Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)						
3. Specification (preferred arrangement set forth below)	[ Total Pages 27	] a. Computer Readable Form (CRF)						
- Descriptive title of the Invention		b. Specification Sequence Listing on:						
Cross Reference to Related Applica     Statement Regarding Fed sponsore     Reference to sequence listing, a tal	ed R & D	i. CD-ROM or CD-R (2 copies); or						
or a computer program listing apper - Background of the Invention	ndix	ii paper						
Brief Summary of the Invention     Brief Description of the Drawings (ii)	filed)	c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS						
- Detailed Description	incuj							
- Claim(s) - Abstract of the Disclosure		9. X Assignment Papers (cover sheet & documents(s))						
4. X Drawing(s) (35 U.S.C. 113) Sheets	[ Total 3	] 10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney						
5. Oath or Declaration Pages	[ Total 1	] 11. English Translation Document (if applicable)						
a. Newly Executed (original or c	ору)	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations						
b. Copy from a prior application (for continuation/divisional with	(37 CFR 1.63(d)) th Box 18 completed)	13. Preliminary Amendment						
i. DELETION OF	NVENTOR(S)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
Signed statement att	ached deleting inventor(s) oplication, see 37 CFR	Certified Copy of Priority Document(s) (if foreign priority is claimed)						
1.63(d)(2) and 1.33(t	o).	16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35						
6. Application Data Sheet. See 37 CFR	1 76	or its equivalent.						
°		17. Other:						
18. If a CONTINUING APPLICATION, check or in an Application Data Sheet under 37 CF	k appropriate box, and su R 1 76:	pply the requisite information below and in a preliminary amendment,						
Continuation Divisional	Continuation-in-part (CIP)	of prior application No:/						
Prior application information: Examiner	_	Group / Art Unit:						
part of the disclosure of the accompanying continuation portion has been inadvertently omitted from the submit	n or divisional application and i	s hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a						
portion has been madvertently omitted from the submit		IDENCE ADDRESS						
57	22	3494 Correspondence address helpy						
Customer Number or Bar Code Label		Attach bar code label here) or Correspondence address below						
NAME Texas Instruments I	ncorporated							
ADDRESS								
CITY STATE		ZIP CODE						
COUNTRY	TELEPHONE W. Dar 4371	niel Swayze 972-917- FAX (972)917-4418						
Name (Print/Type) Michael	A T. Konczal	Registration No. (Attorney/Agent) 45,475						
Signature Michael Kal Date 09/16/03								

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# **FEE TRANSMITTAL** for FY 2003

Complete If Known					
Application Number					
Filing Date					
First Named Inventor	John Kevin Rote				
Examiner Name					
Group Art Unit					
Attorney Docket No.	TI-35799				

		Examiner Name					
		Group Art Unit			TI-35799		
TOTAL AMOUNT OF PAYMENT \$ 786		Attorney Docket No.			11-35799	11-35/99	
METHOD OF PAYMENT		FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3.	3. ADDITIONAL FEES					
— indicated fees and dedit any overpayments to:		Large Entity		Small Entity			
Deposit Account Number	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Deposit	105	130	205	65	Surcharge - late filing fee of oath		
Account Name Texas Instruments Incorporated	127	50	227		Surcharge - late provisional filing fee or cover sheet		
	139	130	139	130	Non-English specification		
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	147	2,520	147		For filing a request for ex parte reexamination		
Applicant claims small entity status. See 37 CFR 1.27	112	920°	112		Requesting publication of SIR prior to Examiner action		
2. Payment Enclosed:	113	1,840*	113		Requesting publication of SIR after Examiner action		
Check Credit Money Other	115	110	215		Extension for reply within first month		
Card Corder C	116	400	216		Extension for reply within second month		
FEE CALCULATION	117	920	217		Extension for reply within third month		
1. BASIC FILING FEE	118	1,440	218	720	Extension for reply within fourth month		
Large Entity Small Entity Fee Fee Fee Fee Description	128	1960	228	980	Extension for reply within fifth month		
Code (\$) Code (\$) Fee Paid	119	320	219	160	Notice of Appeal		
101 750 201 370 Utility filing fee \$750	120	320	220		Filing a brief in support of an appeal		
106 330 206 165 Design filling fee 107 510 207 255 Plant filling fee	121 138	280 1,510	221 138		Request for oral hearing Petition to institute a public use		
108 740 208 370 Reissue filing fee	140	110	240		proceeding Petition to revive - unavoidable		
114 160 214 80 Provisional filling fee	141	1,280	241		Petition to revive - unintentional		
SUBTOTAL (1) (\$)750	142	1,280	242	640	Utility issue fee (or reissue)		
2. EXTRA CLAIM FEES	143	460	243	230	Design issue fee		
Fee from Extra Claims below Fee Paid	144	620	244	310	Plant issue fee		
Total Claims 22 -20**= 2 X 18 = 36	122	130	122		Petitions to the Commissioner		
Independent	123	50	123	50	Petitions related to provisional applications		
Multiple Dependent 0 = 0	126	180	126		Submission of information Disclosure Stmt		
	581	40	581		Recording each patent assignment per property (times number of properties)		
Large Entity Smal Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	146	740	246		Filing a submission after final rejection (37 CFR § 1.129(a))		
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	149	740	249		For each additional invention to be		
102         84         202         42         Independent claims in excess of 3           104         280         204         140         Multiple dependent claim, if not paid	179	740	279	370	examined (37 CFR § 1.129(b))  Request for Continued Examination		
109 84 209 42 **Reissue independent claims over original patent	169	900	169	900	(RCE) Request for expedited examination of a design application		
110 18 210 9 **Reissue claims in excess of 20 and over original patent	Other	foo (coo-	6.A		e. a congri approduoti		
SUBTOTAL (2) \$ 36	Olliei	fee (speci	<i>ו</i> עי			L	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*Redu	ced by Ba	sic Filina	Fee Paid	SUBTOTAL (3)	(¢)	
**or number previously paid, if greater; For Reissue, see above				(\$)			
SUBMITTED BY Michael T. Konczal			Registrati	on	45,475 Complete (if app	4-228-3641	
Name (Print/Type)			No. (Attorney	Agent	,	14.1-	
Signature Muchael 7	15~	<u>ス</u>			Date 09	116/03	

## MICHAEL T. KONCZAL

#### REGISTERED PATENT ATTORNEY

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September 16, 2003

#### Via Express Mail: EU 019864502 US

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Re:

**Utility Patent Application For:** 

**Digital Actuator Control and Method** 

Attorney Docket: TI-35799

Dear Sir:

Enclosed for filing please find the following items relating to the above-identified patent application:

- (1) Utility Patent Application Transmittal;
- (2) Specification;
- (3) 3 Sheets of Formal Drawings;
- (3) Fee Authorization/Transmittal Form;
- (4) Declaration and Power of Attorney:
- (5) Assignment, and Recordation Form Cover Sheet (in duplicate); and
- (6) Postcards (2).

Please charge **Deposit Account No. 20-0668** in the amount of the total fees set forth. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to **Deposit Account No. 20-0668**.

Michael T. Konczal

Registration No. 45,475